## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

25453

7590

11/24/2008

Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

Certificate of Mailing or Transmission

1 Off - He DED DESCRIPTION OF COLD SERVE

INSTRUCTIONS. This form should be used for transmiring the ISSUE FEE and PIBLICATION FEE (if required). Blocks I through 5 should be completed where proposites. All lattices correspondence bending the Perstandance needs and softineation of maintainance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence cultures, under (b) indicates, under (c) indicates, under (c) indicates, under (c) indicates, under (c) indicates. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

PATENT DOCUMENTATION CENTER XEROX CORPORATION 100 CLINTON AVE., SOUTH, XEROX SQUARE, 20TH FLOOR ROCHESTER, NY 14644				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
ROCHESTER,	NY 14644					(Depositor's come)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	AT	TORNEY DOCKET NO.	CONFIRMATION NO.
10/685,238 TITLE OF INVENTION	10/14/2003 I: MULTIFUNCTION D	EVICE SYSTEM USING	Stephen Morris-Jones G TAGS CONTAINING C	UTPUT INFORMATI	D/A3227Q ON	5748
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	02/24/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS	1		
GRANT II, JEROME		2625	358-001 150			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.353).  Change of correspondence address (or Change of Correspondence Address from PTO/SB/123) autached.  The Address of The Address "Indication (or "Fee Address" Indication for mFTO/SB/147, 80 v.0.302 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON '			2. For printing on the patent front page, list (I) the names of up to 3 ngientered patent attorneys or agents OR, alternatively, (2) the name of a single firm sharing at a member a registered attorney or a agent) and the names of up to 2. registered attorney or agents. If no name is 1. Isted, no name will be printed.			
(A) NAME OF ASSIG	Norwa	rporation	data will appear on the p T a substitute for filing an (B) RESIDENCE: (CIT's	and STATE OR COU	NTRY)	cument has been filed for
4a. The following fee(s) are submitted:  4b Typic Fee  4b Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)    A check is enclosed.   244-0025     Byment by rediti card. Form PTO-2038 is attached.   249-0025     The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number   centices an extra copy of this form).			
	s SMALL ENTITY state	s. See 37 CFR I.27.	b. Applicant is no lon	ger claiming SMALL E	ENTITY status. See 37 CF	R 1.27(g)(2).
interest as shown by the r	ecords of the United Sta	tes Patent and Trademark	d from anyone other than t Office.			assignee or other party in
Authorized Signature				Date 12/1/2008		
Typed or printed name	7/			Registration No	45,248	
This collection of informan application. Confident submitting the completed this form and/or suggestion 1450, Alexandria, V Alexandria, Virginia 223. Under the Paperwork Rec	ation is required by 37 Ciality is governed by 35 I application form to the ons for reducing this buying in 22313-1450. DC 13-1450. due to full form the full full full full full full full ful	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR Concross are required to respect to the sent of	on is required to obtain or r I.14. This collection is est depending upon the indiv e Chief Information Office COMPLETED FORMS TO spond to a collection of inf	etain a benefit by the p imated to take 12 minu idual case. Any comm r, U.S. Patent and Trac D THIS ADDRESS. SE ormation unless it displ	ublic which is to file (and ites to complete, including ents on the amount of tim Jemark Office, U.S. Depa END TO: Commissioner for ays a valid OMB control	by the USPTO to process, gathering, preparing, and the you require to complete timent of Commerce, P.O. or Patents, P.O. Box 1450, number.

03 fb 0551 0000